

Scanned by HICKS, STEPHANIE K. OCA in facility HUTCHINS (HJ) on 07/20/2011 13:32

EXHIBIT: 2  
 NAME: Bobbi  
 DATE: 7-20-11  
 TDCJ Serial Number: CR2008

## TEXAS UNIFORM HEALTH STATUS UPDATE

I. NAME: McCollum Lonny G. 4/04/53 AGE: 58  
 Last McCollum First Lonny M. W RACE: W SEX: Male  Female   
 STATE ID# 9950 494 COUNTY/TDCJ# 34610 WT. 330 HT. 5'10

## II. CURRENT/CHRONIC HEALTH PROBLEMS

## A. Health Problems

- 1. None
- 2. Asthma
- 3. Pregnancy
- 4. Dental Priority
- 5. Diabetes
- 6. Drug Abuse
- 7. Alcoholism
- 8. Orthopedic Problems
- 9. Cardiovascular/Heart Trouble
- 10. Sucidal
- 11. Mental Retardation
- 12. Mental Illness (Specify diagnosis) \_\_\_\_\_
- 13. Recent Surgery
- 14. Seizures
- 15. Dialysis
- 16. Hypertension
- 17. CARE System

\*NOTE: When screening substance abuse facility clients, please contact the TDCJ-HD Health Services Liaison at (936)437-3589 for clients with any chronic disease symptoms deemed unstable.

## B. Preventive Medicine

- 1. Tuberculosis Status  
 Skin Test: Date Given: 6/20/11 Date Read: 6/27/11 Results 6 mm<sup>+</sup>  
 X-Ray: Date:   Normal  Abnormal  Anti-TB Treatment? No  Yes
- 2. Hepatitis: A   B   C   Other:
- 3. HIV Antibody: Test Date:   Results: Neg  Pos  CD4:   Date
- 4. Syphilis: Date:   Type:   Treatment Completed: Yes  No

\*NOTE: If any treatment has been recommended, the X-Ray was abnormal, or skin test indicates infection please attach tuberculosis record.

C. Other Health Care Problems: none

## IV. CURRENT PRESCRIBED MEDICATIONS

None \_\_\_\_\_

Medication	Dosage	Frequency
<u>Clavulanic</u>	<u>0.1mg x tab P.O</u>	<u>Prn x 60p</u>

THIS FORM MUST ACCOMPANY ALL OFFENDERS TRANSFERRED TO AND FROM ALL TEXAS CRIMINAL JUSTICE ENTITIES

COMPLETED BY: Shelia Jones, RN DATE: 7-15-11  
 Signature/Titl<sup>e</sup>  
 PHONE NUMBER: 254-757-2555 FACILITY: HCFNUA County Jail

